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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

| | |
|--|----------------------------|
| APPLICATION ELEMENTS | Attorney Docket No. |
| See MPEP chapter 600 concerning utility patent application contents. | |

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. Applicant claims small entity status.
See 37 CFR 1.27.
3. Specification [Total Pages **33**]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (*if filed*)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawing(s) (35 U.S.C. 113) [Total Sheets **4**]
5. Oath or Declaration [Total Pages **2**]
 a. Newly executed (original or copy)
 b. Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 18 completed)
 - i. **DELETION OF INVENTOR(S)**
 Signed statement attached deleting inventor(s)
 named in the prior application, see 37 CFR
 1.63(d)(2) and 1.33(b).
6. Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. CD-ROM or CD-R in duplicate, large table or Computer Program (*Appendix*)
8. Nucleotide and/or Amino Acid Sequence Submission (*if applicable, all necessary*)
 - a. Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies); or
 - ii. paper
 - c. Statements verifying identity of above copies

| | | |
|---|--|--|
| ACCOMPANYING APPLICATION PARTS | | |
| 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> <input type="checkbox"/> Attorney | | |
| 11. <input type="checkbox"/> English Translation Document (<i>if applicable</i>) 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (<i>if foreign priority is claimed</i>) 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other: | | |

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No.: _____ / _____

Prior application information: Examiner _____

Group Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

| | | | | | |
|--|---|-----------------------------------|---------------------|------------|--|
| <input type="checkbox"/> Customer Number or Bar Code Label | (Insert Customer No. or Attach bar code label here) | | | or | <input checked="" type="checkbox"/> Correspondence address below |
| Name | GAUDENCIO AQUINO LABRADOR | | | | |
| Address | 1312 LIAF TERRACE | | | | |
| City | SAN DIEGO | State | CA | Zip Code | 92114 |
| Country | U.S.A. | Telephone | 619-266-2356 | Fax | 1-619-266-2356 |
| Name (Print/Type) | GAUDENCIO A. LABRADOR | Registration No. (Attorney/Agent) | | N/A | |
| Signature |  | | | | Date 8-24-03 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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 10/647884
 08/25/03

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

| | | | |
|--|----|------------------------|-------------------------------|
| | | Application Number | |
| | | Filing Date | |
| | | First Named Inventor | <i>GAUDENCIO A - LABRADOR</i> |
| | | Art Unit | |
| | | Examiner Name | |
| Total Number of Pages in This Submission | 33 | Attorney Docket Number | |

ENCLOSURES (Check all that apply)

| | | |
|--|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input checked="" type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance Communication to Group |
| <input checked="" type="checkbox"/> Fee Attached | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment/Reply | <input type="checkbox"/> Petition | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input checked="" type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Power of Attorney, Revocation | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Change of Correspondence Address | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | <i>* - Specifications - 33 pages</i> |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | <i>* - Drawings - 4 sheets</i> |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) _____ | <i>* - Claims - 6</i> |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application | Remarks | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <i>This is a new submission of an application for patent, containing specifications, 6 claims, an abstract of disclosure, 4 sheets of drawings (Fig. 1 to Fig. 4) for a total of 37 pages.</i> | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | |
|--------------------|----------------------------------|--|
| Firm or Individual | <i>GAUDENCIO Aquino Labrador</i> | |
| Signature | <i>Xabrador</i> | |
| Date | Aug. 23, 2003 | |

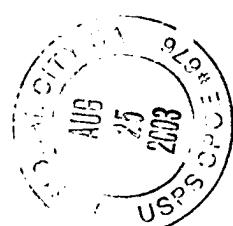
CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:
(EXPRESS MAIL) *Aug. 25, 2003*

| | | |
|------------------|----------------------------------|---------------|
| Typed or printed | <i>GAUDENCIO AQUINO LABRADOR</i> | |
| Signature | <i>Xabrador</i> | |
| | Date | Aug. 25, 2003 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

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 08/25/03
 U.S. PTO

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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)400.00

Complete if Known

| | |
|----------------------|------------------------------|
| Application Number | |
| Filing Date | |
| First Named Inventor | <u>GAUDENCIO A. LABRADOR</u> |
| Examiner Name | |
| Art Unit | |
| Attorney Docket No. | |

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None

Deposit Account:

| | |
|------------------------|--|
| Deposit Account Number | |
| Deposit Account Name | |

The Commissioner is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid |
|----------------------------|----------------------------|------------------------|---------------|
| 1001 750 | 2001 375 | Utility filing fee | <u>\$400.</u> |
| 1002 330 | 2002 165 | Design filing fee | |
| 1003 520 | 2003 260 | Plant filing fee | |
| 1004 750 | 2004 375 | Reissue filing fee | |
| 1005 160 | 2005 80 | Provisional filing fee | |

SUBTOTAL (1) (\$)400.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

| Total Claims | Extra Claims | | Fee from below | Fee Paid | | | |
|--------------------|--------------|-------|----------------|----------|---|---|---|
| | -20** | = | 0 | x | = | 0 | |
| Independent Claims | 1 | - 3** | = | 0 | x | = | 0 |
| Multiple Dependent | | | | | | | 0 |

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description |
|----------------------------|----------------------------|--|
| 1202 18 | 2202 9 | Claims in excess of 20 |
| 1201 84 | 2201 42 | Independent claims in excess of 3 |
| 1203 280 | 2203 140 | Multiple dependent claim, if not paid |
| 1204 84 | 2204 42 | ** Reissue independent claims over original patent |
| 1205 18 | 2205 9 | ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) (\$)N/A

*or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

| Large Entity | Small Entity | Fee Description | Fee Paid |
|--------------|--------------|--|----------|
| 1051 130 | 2051 65 | Surcharge - late filing fee or oath | |
| 1052 50 | 2052 25 | Surcharge - late provisional filing fee or cover sheet | |
| 1053 130 | 1053 130 | Non-English specification | |
| 1812 2,520 | 1812 2,520 | For filing a request for ex parte reexamination | |
| 1804 920* | 1804 920* | Requesting publication of SIR prior to Examiner action | |
| 1805 1,840* | 1805 1,840* | Requesting publication of SIR after Examiner action | |
| 1251 110 | 2251 55 | Extension for reply within first month | |
| 1252 410 | 2252 205 | Extension for reply within second month | |
| 1253 930 | 2253 465 | Extension for reply within third month | |
| 1254 1,450 | 2254 725 | Extension for reply within fourth month | |
| 1255 1,970 | 2255 985 | Extension for reply within fifth month | |
| 1401 320 | 2401 160 | Notice of Appeal | |
| 1402 320 | 2402 160 | Filing a brief in support of an appeal | |
| 1403 280 | 2403 140 | Request for oral hearing | |
| 1451 1,510 | 1451 1,510 | Petition to institute a public use proceeding | |
| 1452 110 | 2452 55 | Petition to revive - unavoidable | |
| 1453 1,300 | 2453 650 | Petition to revive - unintentional | |
| 1501 1,300 | 2501 650 | Utility issue fee (or reissue) | |
| 1502 470 | 2502 235 | Design issue fee | |
| 1503 630 | 2503 315 | Plant issue fee | |
| 1460 130 | 1460 130 | Petitions to the Commissioner | |
| 1807 50 | 1807 50 | Processing fee under 37 CFR 1.17(q) | |
| 1806 180 | 1806 180 | Submission of Information Disclosure Stmt | |
| 8021 40 | 8021 40 | Recording each patent assignment per property (times number of properties) | |
| 1809 750 | 2809 375 | Filing a submission after final rejection (37 CFR 1.129(a)) | |
| 1810 750 | 2810 375 | For each additional invention to be examined (37 CFR 1.129(b)) | |
| 1801 750 | 2801 375 | Request for Continued Examination (RCE) | |
| 1802 900 | 1802 900 | Request for expedited examination of a design application | |

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY

| | | | | | |
|-------------------|------------------------------|--------------------------------------|------------|-----------|-----------------------|
| Name (Print/Type) | <u>GAUDENCIO A. LABRADOR</u> | Registration No. (Attorney/Agent) | <u>N/A</u> | Telephone | <u>(619) 266-2356</u> |
| Signature | <u>Natalia</u> | | | Date | <u>8-23-03</u> |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

CLAIMS AS FILED - PART I

| FOR | NUMBER FILED | NUMBER EXTRA |
|--|--------------|----------------|
| BASIC FEE (37 CFR 1.16(a)) | | |
| TOTAL CLAIMS (37 CFR 1.16(c)) | 6 | minus 20 = * 0 |
| INDEPENDENT CLAIMS (37 CFR 1.16(b)) | 0 | minus 3 = * 0 |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) | | 0 |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|---------------------------------|---|-------|---|------------------|
| Total (37 CFR 1.16(c)) | * | Minus | ** | = |
| Independent (37 CFR 1.16(b)) | * | Minus | *** | = |

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))

| | (Column 1) | (Column 2) | (Column 3) | |
|-------------|---|------------|---|------------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| | Total (37 CFR 1.16(c)) | * | Minus | ** |
| | Independent (37 CFR 1.16(b)) | * | Minus | *** |

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))

| | (Column 1) | | (Column 2) | (Column 3) |
|--|---|---|---|------------------|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| | Total (37 CFR 1.16(c)) | * | Minus | ** |
| | Independent (37 CFR 1.16(b)) | * | Minus | *** |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | |

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

| RATE | FEES | RATE | FEES |
|--------------|----------|------|--------------|
| | \$ 400 + | OR | \$ _____ |
| x \$ _____ = | 0 | OR | x \$ _____ = |
| x _____ = | 0 | OR | x _____ = |
| + _____ = | 0 | OR | + _____ = |
| TOTAL | 400.00 | OR | TOTAL |

**OTHER THAN
SMALL ENTITY**

| RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
|--------------------|----------------|--------------------|----------------|
| x \$ ____ = | | OR x \$ ____ = | |
| x ____ = | | OR x ____ = | |
| + ____ = | | OR + ____ = | |
| TOTAL ADDT. FEE | | TOTAL ADDT. FEE | |

R TOTAL
ADDET. FEE

| RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
|------------------|----------------|------------------|----------------|
| x \$ ____ = | | OR x \$ ____ = | |
| x ____ = | | OR x ____ = | |
| + ____ = | | OR + ____ = | |
| TOTAL ADDIT. FEE | | TOTAL ADDIT. FEE | |

R TOTAL
ADDET. FEE

| RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
|------------------|----------------|---------------------|----------------|
| x \$ ____ = | | OR x \$ ____ = | |
| _____ = | | OR _____ = | |
| _____ = | | OR _____ = | |
| _____ = | | OR + _____ = | |
| TOTAL ADDIT. FEE | | OR TOTAL ADDIT. FEE | |

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